## Agency Report of: Public Official Appointments

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1. Agency Name				T		Colifornia a con
Town of Los Gate	os				California 806	
Division, Departm		gion (If Applicable)	-		For Official Use Only	
Designated Agenc	y Contact	(Name, Title)	-			
Shelley Neis, Cle	rk Admini	strator				
Area Code/Phone		E-mail		+		Date Posted:
(408) 354-6835		Clerk@LosGatosCA.gov		Page1	of	12/23/15
2. Appointments						(Month, Day, Year)
Agency Boards Commission		Name of Appointed Person		Appt Date and Length of Term	Per Me	eting/Annual Salary/Stipend
West Valley San District Board of	est Valley Sanitation strict Board of Directors	Name Leonardis, Steve (Last, First)  Alternate, if any Jensen, Marcia (Last, First)		2 / 15 / 15	▶ Per Med	eting: \$150.00
				Appt Date  1 year  Length of Term	► Estimated Annual:  S0-\$1,000	
		▶Name(Last, First)	-			Other
		(Last, First)  Alternate, if any(Last, First)		Appt Date  Length of Term	▶ Estimated Annual:         □ \$0-\$1,000       □ \$2,001-\$3,000         □ \$1,001-\$2,000       □         Other	
		Name(Last, First)	_ -	/	Per Meet	ing: \$
		Alternate, if any	-	Length of Term	\$0-\$1,000	\$2,001-\$3,000
		Name(Last, First)  Alternate, if any(Last, First)		Appt Date  Length of Term	▶ Per Meetii  ▶ Estimated  □ \$0-\$1,00  □ \$1,001-\$	0 \$2,001-\$3,000
Verification	5000 D					Other
Share read and understand F	Regulati	on 18705.5. I have verified that the appointment and				my information and belief.
Signature of Agency Head	or Designee	Shelley Neis  Print Name		Clerk Administr	ator	12/23/15
	_	- ma ivame		Title		(Month, Day, Year)
Comment:				-		